

**Lawrence Livermore National Laboratory
Public Affairs Office
Super Science Field Trip**

Today's Date _____

School District _____

Name of School _____

Address of School _____

Teacher Name _____ Grade: ☐ 4th ☐ 5th ☐ Combo

Phone Number _____ E-mail Address _____

Number of Students _____ Number of Chaperones _____

Do any of your students have special needs we should be aware of? ☐ No ☐ Yes

If yes, please explain:

What is the best way/time to reach you?

What areas of science are you currently studying in the classroom?

What do you hope to achieve by bringing your students to the Laboratory?

Please return this form to:

**Super Science Field Trip Coordinator
Lawrence Livermore National Laboratory
P.O. Box 808 (L-797)
Livermore, CA 94551 Fax: (925) 422-0388**

This is a popular program. Submit your form early in the school year. A Laboratory field trip coordinator will contact you to schedule a date for your class.

PLEASE DO NOT WRITE BELOW THIS LINE. FOR OFFICE USE ONLY.

☐ Sched/Date: _____ ☐ Cfrm Email ☐ PrePack ☐ Rmdr Call ☐ Filemkr
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